

TENNESSEE COMMITTEE OF MEDICAL EXAMINERS' COMMITTEE ON PHYSICIAN ASSISTANTS Regular Committee Meeting

October 4, 2019

MINUTES

The regular meeting of the Tennessee Committee of Medical Examiners' Committee on Physician Assistants (hereinafter, the Committee") was called to order at 9:00 a.m. in the Poplar Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Mr. Bret Reeves.

Bret Reeves PA-C

Members Present: Marie Patterson PA-C

Barbara Thornton, Consumer Member

Donna Lynch PA-C Gary Tauxe OPA-C Christina Free PA-C

Staff Present: Rene Saunders, MD, Medical Consultant

Angela Lawrence, Executive Director Stacy Tarr, Administrative Director

Andrea Huddleston, JD, Deputy General Counsel Orlanda Folston, Committee Administrator

APPROVAL OF MINUTES

The Committee reviewed the minutes from the July, 2019 regular meeting and the August 2019 special Teleconference meeting. Ms. Barbara Thornton made a motion to approve the minutes as presented. Ms. Marie Patterson seconded the motion. The motion passed.

PRESENTATION BY DR. MICHAEL BARON

Dr. Baron, Director of the Tennessee Medical, presented an update to the Committee. Dr. Baron reported TMF is currently monitoring twelve (12) Physician Assistants across Tennessee. On October 1, 2018 TMF began using a smart phone app for electronic monitoring of compliance of participants with a 5 year monitoring agreement. Dr. Baron stated he is optimistic that it will be ready by November 2019 and would update the Committee again on success of the program in six (6) months.

APPLICANT INTERVIEWS

Leah Mosley, PA – appeared before the Committee without legal representation. Ms. Mosley appeared for being out of clinical practice since August 2011. Ms. Mosley is NCCPA certified and stated that she is interested in working in hematology – oncology. She has spoken with University Cancer Associates and they have agreed to allow her do the 15 week preceptorship there. Ms. Lynch motioned to grant a temporary license to pursue the preceptorship. Ms. Free seconded the motion. The motion was amended to include completion of instruction in pharmacology. Ms. Free agreed that she still seconded the motion. The motion passed.

Susan Van Hook, PA – appeared before the Committee without legal representation. Ms. Van Hook is NCCPA certified and has been out of clinical practice since 2001. Ms. Van Hook has completed a PLAS Assessment as well as a pharmacology course and will be monitored per the report. Ms. Free motioned to grant a license based on the PLAS recommendation and completion of the pharmacology instruction. The motion was seconded by Ms. Thornton. The motion passed.

Jennifer Heinrich, PA – appeared before the Committee without legal representation. Ms. Heinrich is NCCPA certified and has been out of clinical practice since 2008. Ms. Heinrich is an applicant for reinstatement and has completed the PLAS assessment to which the results have not been received by the Physician Assistant Committee. There was discussion as to whether Dr. Saunders could make the decision to grant the license or have Ms. Heinrich return for the Committee to review the results of the assessment. Ms. Thornton made a motion to license her contingent on the PLAS recommendations per Dr. Saunders recommendations. Ms. Patterson seconded the motion. The motion passed.

LEGISLATION

Legislative Update 2019: Physician Assistants Board

Public Chapter 61

This act states that an entity responsible for an AED program is immune from civil liability for personal injury caused by maintenance or use of an AED if such conduct does not rise to the level of willful or wanton misconduct or gross negligence.

This act took effect on March 28, 2019.

Public Chapter 117

This act adds a definition of "alternative treatments" to 63-1-164 pertaining to the restrictions and limitations on treating patients with opioids.

This act took effect April 9, 2019.

Public Chapter 124

This act makes a variety of small changes and additions to the TN Together opioid initiative put in place in 2018. One addition is allowing access to CSMD data to a healthcare practitioner under review by a quality improvement committee (QIC), as well as to the QIC, if the information is furnished by a healthcare practitioner who is the subject of the review by the QIC.

The requirement for e-prescribing of all schedule II substances by January 1, 2020 has been delayed to January 1, 2021 and is modified to require all schedules II through V prescriptions to be e-prescribed except under certain

circumstances. The law also requires all pharmacy dispensing software vendors operating in the state to update their systems to allow for partial filling of controlled substances.

Definitions are given by this act to the terms palliative care, severe burn and major physical trauma. Along with its new definition, palliative care has now joined severe burn and major physical trauma as an exception to the opioid dosage limits otherwise required under TN Together.

An unintended consequence of last year's Public Chapter 1039 was on cough syrup. This act establishes that the law does not apply to opioids approved by the FDA to treat upper respiratory symptoms or cough, but limits such cough syrup to a 14 day supply.

Also changed from last year's act is the requirement to partial fill. Partial filling of opioids is now permissive. Finally, the opioid limits under have been simplified from the previous year's act. The twenty day supply and morphine milligram equivalent limit has been eliminated. Three day and ten day requirements remain the same. Instances such as more than minimally invasive surgery, which previously fell under the twenty day provision, now can be treated under the limits of the thirty day category.

This act took effect on April 9, 2019.

Public Chapter 144

This act amends the Prevention of Youth Access to Tobacco and Vapor Products Act by limiting the places in which one may use vapor products. The act defines vapor products and prohibits the use of such products in a number of locations including child care centers, group care homes, healthcare facilities (excluding nursing homes), residential treatment facilities, school grounds, and several other areas. Several locations have specific exceptions set forth in the statute.

This act took effect on April 17, 2019.

Public Chapter 156

This public chapter creates a commemorative certificate of nonviable birth. The licensed healthcare practitioner who attends or diagnoses a nonviable birth, may, based on the practitioner's best medical judgment and knowledge of the patient, advice a patient that experiences a nonviable birth that the patient may obtain a commemorative certificate from the Department of Health. The Department shall provide a form on its website that the practitioner shall execute and provide to the patient. Upon the request of the patient, the Department shall issue the commemorative certificate within 60 days after the request and shall charge a fee not to exceed the actual cost for issuing the certificate.

This act took effect April 18, 2019.

Public Chapter 183

This act permits advanced practice registered nurses (APRNs) and physician assistants (PAs) working in a community mental health center to have their chart review done remotely by their collaborating physician. The electronic means by which the transmission occurs must be HIPAA-compliant.

This act took effect April 23, 2019.

Public Chapter 195

The majority of this act pertains to boards governed by the Department of Commerce and Insurance. One small section applies to the health related boards. Currently, the health related boards have an expedited licensure process for military members and their spouses. Previously, a spouse of an active military member had to leave active employment to be eligible for this expedited process. This act removes that requirement. This section applies to all health related boards. The Commissioner of Health is permitted to promulgate rules, but rules are not needed to implement the act.

This act takes effect July 1, 2019.

Public Chapter 229

This act allows healthcare professionals to accept goods or services as payment in direct exchange of barter for healthcare services. Bartering is only permissible if the patient to whom services are provided is not covered by

health insurance. All barters accepted by a healthcare professional must be submitted to the IRS annually. This act does not apply to healthcare services provided at a pain management clinic. This act took effect April 30, 2019.

Public Chapter 243

This act mandates that an agency that requires a person applying for a license to engage in an occupation, trade, or profession in this state to take an examination must provide appropriate accommodations in accordance with the Americans with Disabilities Act (ADA). Any state agency that administers a required examination for licensure (except for examinations required by federal law) shall promulgate rules in regard to eligibility criteria. This legislation was introduced to assist individuals with dyslexia.

This act took effect May 2, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2020.

Public Chapter 245

This act prohibits any person who is not licensed or certified by the Board of Nursing from using the title "nurse" or any other title that implies that the person is a practicing nurse. The Board is empowered to petition any circuit or chancery court having jurisdiction to enjoin: (1) a person attempting to practice or practicing nursing without a valid license; (2) a licensee found guilty of any of the acts listed in 63-7-115; or (3) any person using the title "nurse" who does not possess valid license or certificate from the Board.

This act took effect May 2, 2019.

Public Chapter 255

The act permits a medical professional who has a current license to practice from another state, commonwealth territory, or the District of Columbia is exempt from the licensure requirements of such boards if: (1) the medical professional is a member of the armed forces; and (2) the medical professional is engaged in the practice of the medical profession listed in 68-1-101 through a partnership with the federal Innovative Readiness Training. The respective health boards may promulgate rules for implementation.

This act took effect April 18, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2019.

Public Chapter 264

This act permits the attorney general, reporter, and personnel to access confidential data from the Controlled Substance Monitoring Database upon request for the purposes of investigation or litigation of a civil action. Release of this information to other parties must be accompanied by an appropriate protective order. This bill was brought by the Office of the Attorney General.

This act took effect April 30, 2019.

Public Chapter 268

This act rewrites the criminal offense for female genital mutilation. Those who knowing mutilate a female, facilitate the mutilation, or knowingly transport or facilitate the transportation of a female for the purposes of mutilation are subject to a class D felony. Such individuals are also liable civilly. Any physician, physician in training, certified nurse or midwife or any other medical professional that performs, participates in, or facilitates a mutilation shall be subject to disciplinary action by the appropriate licensing board in addition to criminal penalties. Certain medical procedures listed in the statute are not considered violations. This act takes effect July 1, 2019.

Public Chapter 307

This act requires the Department of Health to include data related to complications of induced abortions, including the number and type of complications in its annual induced termination of pregnancy (ITOP) data report. The department shall not release any data that could identify individual patients. The department may promulgate rules necessary to implement this act.

This act took effect May 8, 2019 for the purpose of promulgating rules, and for all other purposes will take effect July 7, 2019.

Public Chapter 327

This act requires the Commissioner of Health, by January 1, 2020, to study instances when co-prescribing of naloxone with an opioid is beneficial and publish the results to each prescribing board and to the board of pharmacy. The findings shall be included in the chronic pain guidelines adopted by the Chronic Pain Guidelines Committee.

This act took effect May 8, 2019.

Public Chapter 447

This act permits law enforcement agencies to subpoen materials and documents pertaining to an investigation conducted by the Department of Health prior to formal disciplinary charges being filed against the provider. This bill was brought by the Tennessee Bureau of Investigation.

This act went into effect May 22, 2019.

CONDUCT NEW BUSINESS

Ratification of PA Licenses

Ms. Patterson motioned to ratify the new and reinstated licenses. Ms. Thornton seconded the motion and the motion passed.

Discussion Regarding Rulemaking Language for Reentry Policy

Ms. Huddleston presented options for the course however the committee chose to table the discussion. The Committee discussed several options for the requirements concerning a Pharmacology course. However, after discussion the committee chose to table the discussion. A motion was made by Ms. Thornton to move forward to a rulemaking hearing. Mr. Reeves seconded the motion. The motion passed.

Discuss and considered sending members and staff to the FSMB meeting in November 2019. Ms. Patterson made a motion to send one staff member and one Committee Member to the FSMB meeting, to be funded by the Committee. Ms. Thornton seconded the motion. The motion passed.

Discuss and considered sending members and staff to the 2020 Rx Treatment Drug Abuse and Heroin Summit meeting in April 2020. Ms. Patterson made a motion to send one Committee member and two Attorneys to the 2020 Rx Treatment Drug Abuse and Heroin Summit, to be funded by the Committee. Ms. Thornton seconded the motion. The motion passed.

DEPARTMENTAL REPORTS

Office of Investigations

Ms. Lori Leonard presented the Office of Investigations Report

Currently Monitored PA Practitioners

On Probation – 5 Suspended – 3 Revoked and/or Surrendered – 8 Reprimand - 1

Investigation Report New Complaints

Action in another State – 1
Malpractice - 3
Unprofessional Conduct – 9
Drug Diversion – 1
Fraud and False Billing -1
Sexual Conduct - 3

Closed Complaints

Insufficient Evidence – 2
Sent to Office of General Counsel for Formal Discipline – 9
Closed without Action – 15
Letter of Concern (not reportable to NPDB as discipline) 1
Currently Being Reviewed – 21

Orthopedic PA Practitioners

New Complaints – 2 Malpractice – 1 Unlicensed Practice -1

Managers' Report

Ms. Stacy Tarr presented the Managers' Report

The information provided is for the period of July 1, 2019 through September 30, 2019.

New Applications Received 93

Total New Licenses Issued 68

Total Number of Renewals 273

Total Number of Online Renewals 239

Average Renewals Online 198 (87%)

Total Number of Reinstatements 10

Total number of active licensees as of September 30, 2019 is 2,512.

Total number of active licenses as of September 30, 2019 with a Tennessee mailing address is 2141.

Total number of OPA licenses as of September 30, 2019 is 14.

Agreed Consent Order

Michelle Vasireddy, PA – Ms. Vasireddy was not present. Andrew Coffman presented on behalf of the Office of General Counsel (hereinafter, "OGC"). Mr. Coffman stated that Ms. Vasireddy wrote prescriptions using other people's prescription authority to herself without their knowledge. She also had

prescriptive authority and wrote prescriptions for other individuals without their knowledge and filled the prescriptions for herself. As a result of her conduct and subsequent investigation she has surrendered her DEA registration and can no longer write prescriptions by the Federal Government. Ms. Vasireddy has reached a resolution with OGC. She has attended a residual treatment program and agrees that her license should be suspended until she receives advocacy from TMF. She will be required to comply with monitoring that TMF deems appropriate. Once she receives advocacy with TMF she will be required to come back to the Committee and be required to have her license on probation for 5 years and will not be able to prescribe controlled substances. After 5 years she can come back to the Committee and Ms. Vasireddy can request to have her prescribing privileges reinstated. In order to grant that privilege the Committee would have to get the approval of TMF that it is safe for Ms. Vasireddy to prescribe and give a reasonable plan about how to safely prescribe. The license will be on probation for the first 5 years that she prescribes controlled substances. There are no civil penalties but she has agreed to pay the cost of this action. Ms. Lynch moved to accept the consent order as submitted. Ms. Patterson seconded the motion. The motion passed.

Office of General Counsel

Ms. Huddleston presented the Office of General Counsel Report: Pending rulemaking is a rule regarding re-entry. A draft was previously provided and is pending comment from the Committee.

LITIGATION

Pending rulemaking is a rule regarding re-entry. A draft was previously provided and is pending comment from the Committee.

LITIGATION

APPEALS

Name of respondent	Year of Board action	Subject of appeal	Last action
Sparks, Norma	2016	Reprimand, penalties and costs due to rendering of services outside supervising physician's scope of expertise; failure to register with and query CSMD.	Petition for Review filed October 2017. Chancellor issued opinion June 21, 2018, reversing decision of Committee. Appeal filed to Court of Appeals July 18, 2018. Opinion filed September 6, 2019, upholding Chancery decision.

CIVIL SUITS: None.

PENDING COMPLAINTS

As of October 1, 2019, OGC has eight (8) open cases against seven (7) respondents pertaining to physician assistants. There is one Consent Order presented at this meeting.

Marie Patterson made a motion to adjourn the motion was seconded by Barbara Thornton and the meeting was adjourned.